DEPARTMENT OF THE AIR FORCE

HEADQUARTERS 49TH FIGHTER WING (ACC)
HOLLOMAN AIR FORCE BASE, NEW MEXICO

FROM: 49 CES/CEV
550 Tabosa Ave
Holloman AFB, Mew Mexico 88330-8458

SUBJ: Part A Permits

TO: State of New Mexico, Environment Department
Hazardous and Radioactive Materials Bureau
Attn: Barbara Hoditscek
525 Camino De Los Marquez
P.O. Box 26110
Santa Fe, New Mexico 87502

1. Attached are the updated Resource Conservation and Recovery Act (RCRA) Part A permits that you have requested.

2. Holloman AFB (HAFB) did not combine all operations in one permit due to the fact that Defense Reutilization and Marketing Office (DRMO) is operated by another government agency. However, we did combine the 3001b Open Burn Pit (OB) and the 20,0001b Open Detonation Pit (OD) since HAFB is both owner and operator.

3. If you have any questions, please contact Cathy Giblin at 475-3931.

GORDON R. JANIEC, Lt Col, USAF
Base Civil Engineer

2 Atchs
1 Part A Permit - DRMO
2 Part A Permit - OB/OD

1993 JUN 4
RECEIVED
HAZARDOUS WASTE PROGRAM

Please print or type with ELITE type (12 characters per inch) in the unshaded areas only

Form Approved. OMB No. 2050-0034 Expires 9-30-92
GSA No. 0246-EPA-OT

For EPA Regional Use Only	EPA United States Environmental Protection Agency Washington, DC 20460 # Hazardous Waste Permit Application Part A *(Read the Instructions before starting)*	For State Use Only
Date Received Month Day Year		

I. Installation's EPA ID Number *(Mark 'X' in the appropriate box)*

[ ] A. First Part A Submission

[X] B. Part A Amendment # 9

C. Installation's EPA ID Number: N M 6 5 7 2 1 2 4 4 2 2

D. Secondary ID Number *(if applicable)*:

II. Name of Facility: HOLLMAN AIR FORCE BASE

III. Facility Location *(Physical address not P.O. Box or Route Number)*

A. Street: 550 TABOSA AVE

Street *(continued)*: 49 CES/CEV

City or Town: HOLLOMAN AFB

State: NM

ZIP Code: 88330-8458

County Code *(if known)*:

County Name: OTERO

B. Land Type *(enter code)*: F

C. Geographic Location

LATITUDE (degrees, minutes, & seconds): 32 50 041

LONGITUDE (degrees, minutes, & seconds): 106 05 040

D. Facility Existence Date

Month Day Year: 01 01 1971

IV. Facility Mailing Address

Street or P.O. Box: SAME

City or Town:

State:

ZIP Code:

V. Facility Contact *(Person to be contacted regarding waste activities at facility)*

Name *(last)*: WILKSON

(first): ROGER

Job Title: CH ENVIRONMENTAL

Phone Number *(area code and number)*: 505-479-3931

VI. Facility Contact Address *(See Instructions)*

A. Contact Address

Location [X] Mailing [ ]

B. Street or P.O. Box:

City or Town:

State:

ZIP Code:

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EPA I.D. Number (enter from page 1)	Secondary I.D. Number (enter from page 1)
N M 6 5 7 2 1 2 4 4 2 2	

VII. Operator Information (see instructions)

Name of Operator: SEE ATTACHMENT

Street or P.O. Box:

City or Town: | State: | ZIP Code:

Phone Number (area code and number): 5 0 5 - 4 7 9 - 7 8 6 0

B. Operator Type: F

C. Change of Operator Indicator: Yes X No ☐ — Date Changed: Month 0 4 Day 1 5 Year 9 3

VIII. Facility Owner (see instructions)

A. Name of Facility's Legal Owner: SEE ATTACHMENT

Street or P.O. Box:

City or Town: | State: | ZIP Code:

Phone Number (area code and number): 5 0 5 - 4 7 9 - 5 5 7 1

B. Owner Type: F

C. Change of Owner Indicator: Yes X No ☐ — Date Changed: Month 0 4 Day 1 5 Year 9 3

IX. SIC Codes (4-digit, in order of significance)

Primary		Secondary	
9 7 1 1	(description) National Security		(description)

X. Other Environmental Permits (see instructions)

A. Permit Type (enter code)	B. Permit Number	C. Description
P	2 9 1 / 2 9 1 M 1	Bulk Storage Tanks - Air Bureau
	N O N E	OB/OD 300#/20,000# EOD

ATTACHMENT TO RCRA PART A

EPA ID # NM6572124422

VII. Name of Operator:

DEFENSE LOGISTICS AGENCY
Defense Reutilization and Marketing Service
500 West 12th Street, Bldg 2A-1
Ogden, Utah 84407-5905

ALBERT N. TINIANOW
Colonel, (Sel.) USAF
DRMS Deputy Commander

VIII. Name of Facilities Legal Owner

49 FW/CC
490 First Street, Ste 1700
Holloman Air Force Base, New Mexico 88330-8457

LLOYD W. NEWTON
Brigidier General, USAF
Commander

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XI. Nature of Business (provide a brief description)

The base is headquarters to the Air Combat Command 49th Fighter Wing. Supports national security objectives with F-117 Stealth fighters, HH-60 helicopters, medical and Bare Base assets. Rapidly mobilize and deploy worldwide to meet peacetime and wartime contingencies. Train USAF and selected allied aircrews in AT-38 Initial Fighter Fundamentals and F-4E Fighter Transition courses. Supports over 19,000 personnel. The base supports several tenants 4th Space Warning Systems, 46th Test Group, 475th WEG, 4th and 25th weather wing, contractors and others. As a result of the above stated organizations and their mission related activities, certain processes on base generate waste materials subject to regulation under the Hazardous Waste Regulations of the State of N.M. and Subtitle C of the Resource Conservation and Recovery Act(40CFR260-271)

XII. Process - Codes and Design Capacities

A. PROCESS CODE - *Enter the code from the list of process codes below that best describes each process to be used at the facility. Twelve lines are provided for entering codes. If more lines are needed, attach a separate sheet of paper with the additional information. If a process will be used that is not included in the list of codes below, then describe the process (including its design capacity) in the space provided in item XIII.*

B. PROCESS DESIGN CAPACITY - *For each code entered in column A, enter the capacity of the process.*

1. AMOUNT - *Enter the amount. In a case where design capacity is not applicable (such as in a closure/post-closure or enforcement action) enter the total amount of waste for that process unit.*
2. UNIT OF MEASURE - *For each amount entered in column B(1), enter the code from the list of unit measure codes below that describes the unit of measure used. Only the units of measure that are listed below should be used.*

C. PROCESS TOTAL NUMBER OF UNITS - *Enter the total number of units used with the corresponding process code.*

PROCESS CODE	PROCESS	APPROPRIATE UNITS OF MEASURE FOR PROCESS DESIGN CAPACITY
	Disposal:	
D79	Injection Well	Gallons; Liters; Gallons Per Day; Or Liters Per Day
D80	Landfill	Acre-feet Or Hectare-meter
D81	Land Application	Acres Or Hectares
D82	Ocean Disposal	Gallons Per Day Or Liters Per Day
D83	Surface Impoundment	Gallons Or Liters
	Storage:	
S01	Container (Barrel, Drum, Etc.)	Gallons Or Liters
S02	Tank	Gallons Or Liters
S03	Waste Pile	Cubic Yards Or Cubic Meters
S04	Surface Impoundment	Gallons Or Liters
	Treatment:	
T01	Tank	Gallons Per Day Or Liters Per Day
T02	Surface Impoundment	Gallons Per Day Or Liters Per Day
T03	Incinerator	Short Tons Per Hour; Metric Tons Per Hour; Gallons Per Hour; Liters Per Hour; Or Btu's Per Hour
T04	Other Treatment	Gallons Per Day; Liters Per Day; Pounds Per Hour; Short Tons Per Hour; Kilograms Per Hour; Metric Tons Per Day; Metric Tons Per Hour; Or Short Tons Per Day

PROCESS CODE	PROCESS	APPROPRIATE UNITS OF MEASURE FOR PROCESS DESIGN CAPACITY
	Boilers And Industrial Furnaces:	
T80	Boiler	Gallons Or Liters
T81	Cement Kiln	Gallons Per Day; Liters Per Day; Pounds Per Hour; Short Tons Per Hour; Kilograms Per Hour; Metric Tons Per Day Or Short Tons Per Day
T82	Lime Kiln	
T83	Aggregate Kiln	
T84	Phosphate Kiln	
T85	Coke Oven	
T86	Blast Furnace	
T87	Smelting, Melting, Or Refining Furnace	
T88	Titanium Dioxide Chloride Process Oxidation Reactor	
T89	Methane Reforming	
T90	Pulping Liquor Recovery Furnace	
T91	Combustion Device Used In The Recovery Of Sulfur Values From Spent Sulfuric-Acid	
T92	Halogen Acid Furnaces	
T93	Other Industrial Furnaces Listed In 40 CFR §260.10	
T94	Containment Building	

UNIT OF MEASURE	UNIT OF MEASURE CODE
Gallons	G
Gallons Per Hour	E
Gallons Per Day	U
Liters	L
Liters Per Hour	H
Liters Per Day	V

UNIT OF MEASURE	UNIT OF MEASURE CODE
Short Tons Per Hour	D
Metric Tons Per Hour	W
Short Tons Per Day	N
Metric Tons Per Day	S
Pounds Per Hour	J
Kilograms Per Hour	R

UNIT OF MEASURE	UNIT OF MEASURE CODE
Cubic Yards	Y
Cubic Meters	C
Acres	B
Acre-feet	A
Hectares	Q
Hectare-meter	F
Btu's Per Hour	K

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GSA No. 0246-EPA-OT

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N	M	6	5	7	2	1	2	4	4	2	2	

XII. Process – Codes and Design Capabilities (continued)

EXAMPLE FOR COMPLETING ITEM XII (shown in line numbers X-1 and X-2 below): A facility has two storage tanks, one tank can hold 400 gallons and the other can hold 133,788 gallons. The facility also has an incinerator that can burn up to 27.1 gallons per hour.

Line Number		A. Process Code (from list above)			B. TREATMENT PROCESS DESIGN CAPACITY 1. Amount (specify)	2. Unit Of Measure (enter code)	C. Process Total Number Of Units	For Official Use Only
X	1	S	0	2	1 3 3 7 8 8	G	0 0 2	
X	2	T	0	3	2 7 . 1 0 0	L	0 0 1	
	1	S	0	1	12,760 . 00	G	001	
	2				.			
	3				.			
	4				.			
	5				.			
	6				.			
	7				.			
	8				.			
	9				.			
1	0				.			
1	1				.			
1	2				.			

NOTE: If you need to list more than 12 process codes, attach an additional sheet(s) with the information in the same format as above. Number the lines sequentially, taking into account any lines that will be used for additional treatment processes in Item XIII.

XIII. Additional Treatment Processes (follow instructions from Item XII)

Line Number (enter #s in seq w/ XII)		A. Process Code (from list above)			B. TREATMENT PROCESS DESIGN CAPACITY 1. Amount (specify)	2. Unit Of Measure	C. Process Total Number Of Units	D. Description Of Process
X	1	T	0	4	2 0 6 4 0 0	L	0 1 6	
X	2	T	0	4	9 5 2 9 0	H	0 0 3	
	1				.			
	2				.			
	3				.			
	4				.			
	5				.			
	6				.			
	7				.			
	8				.			
	9				.			
1	0				.			
1	1				.			

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N	M	6	5	7	2	1	2	4	4	2	2	

XIV. Description of Hazardous Wastes

A. WASTE STREAM NUMBER – *Enter sequential waste stream number. A waste stream may be composed of one or more waste codes.*

B. ESTIMATED ANNUAL QUANTITY OF WASTE STREAM – *For each waste stream estimate the quantity of that waste that will be handled on an annual basis.*

C. UNIT OF MEASURE – *For each quantity entered in column B enter the unit of measure code. Units of measure which must be used and the appropriate codes are:*

ENGLISH UNIT OF MEASURE	CODE	METRIC UNIT OF MEASURE	CODE
POUNDS	P	KILOGRAMS	K
TONS	T	METRIC TONS	M

If facility records use any other unit of measure for quantity, the units of measure must be converted into one of the required units of measure taking into account the appropriate density or specific gravity of the waste.

D. WASTE CODES – *Enter the waste code for every waste in this waste stream.*

E. PROCESSES

1. PROCESS CODES:

For listed hazardous waste: For each listed hazardous waste stream entered in column A select the code(s) from the list of process codes contained in Item XII A. on page 3 to indicate how the waste will be stored, treated, and/or disposed of at the facility.

For non-listed hazardous waste: For each characteristic or toxic contaminant entered in column A, select the code(s) from the list of process codes contained in Item XII A. on page 3 to indicate all the processes that will be used to store, treat, and/or dispose of all the non-listed hazardous wastes that possess that characteristic or toxic contaminant.

List all process codes that apply to this waste stream.

2. PROCESS DESCRIPTION: *If a code is not listed for a process that will be used, describe the process in the space provided on the form (E.(2)).*

EXAMPLE FOR COMPLETING ITEM XIV (shown in line numbers X-1, X-2, and X-3 below) – A facility will store and treat three waste streams. Waste stream 1 contains 550.10 tons of toxaphene which the facility intends to store in a tank. The facility estimates that waste stream 2 contains 2020.5 tons of hydrogen sulfide, lead, and wastewater treatment sludges generated in the production of creosote. These wastes will be held in storage containers and tanks, and then incinerated. The third waste stream (3) at the facility comprises an estimated 10.557 pounds of silver which will be stored in storage containers prior to being shipped off-site.

A. Waste Stream Number	B. Estimated Annual Quantity Of Waste	C. Unit Of Measure (enter code)	D. Waste Codes (for this waste stream)		E. Processes (1). Process Codes (for this waste stream)		(2). Process Description (If a code is not entered in E(1))
X-1	550.10	T	D015		S02		
X-2	2020.5	T	U135	D008	S01	T02	
			K035		S02		
X-3	10.557	P	D011		S01		

Continued from page 2.
NOTE: Photocopy this page before completing if you have more than 26 wastes to list.

Form Approved OMB No. 158-S80004

EPA I.D. NUMBER (enter from page 1): V M 6 5 7 2 1 2 4 4 2 2 — T/A C: 1

FOR OFFICIAL USE ONLY: W DUP — T/A C: 2 DUP

DESCRIPTION OF HAZARDOUS WASTES (continued)

LINE NO.	A. EPA HAZARD. WASTE NO. (enter code)	B. ESTIMATED ANNUAL QUANTITY OF WASTE	C. UNIT OF MEASURE (enter code)	D. PROCESSES 1. PROCESS CODES (enter)	D. PROCESSES 2. PROCESS DESCRIPTION (If a code is not entered in D(1))
1	D001	10,500	P	S01	
2	D002	11,000	P	S01	
3	D003	2,500	P	S01	
4	D004	200	P	S01	
5	D005	200	P	S01	
6	D006	2,500	P	S01	
7	D007	2,500	P	S01	
8	D008	2,500	P	S01	
9	D009	1,000	P	S01	
10	D010	500	P	S01	
11	D011	500	P	S01	
12	D012	500	P	S01	
13	D013	500	P	S01	
14	D014	500	P	S01	
15	D015	500	P	S01	
16	D016	500	P	S01	
17	D017	500	P	S01	
18	D018	500	P	S01	
19	D019	500	P	S01	
20	D020	500	P	S01	
21	D021	500	P	S01	
22	D022	500	P	S01	
23	D023	500	P	S01	
24	D024	500	P	S01	
25	D025	500	P	S01	
26	D026	500	P	S01	

Continued from page 2.
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Form Approved OMB No. 158-S80004

EPA I.D. NUMBER (enter from page 1): W N M 6 5 7 2 1 2 4 4 2 2 T/A 1

FOR OFFICIAL USE ONLY: W DUP T/A 2 DUP

DESCRIPTION OF HAZARDOUS WASTES (continued)

LINE NO.	A. EPA HAZARD. WASTE NO. (enter code)	B. ESTIMATED ANNUAL QUANTITY OF WASTE	C. UNIT OF MEASURE (enter code)	D. PROCESSES 1. PROCESS CODES (enter)	2. PROCESS DESCRIPTION (If a code is not entered in D(1))
1	D027	500	P	S01	
2	D028	500	P	S01	
3	D029	500	P	S01	
4	D030	500	P	S01	
5	D031	500	P	S01	
6	D032	500	P	S01	
7	D033	500	P	S01	
8	D034	500	P	S01	
9	D035	500	P	S01	
10	D036	500	P	S01	
11	D037	500	P	S01	
12	D038	500	P	S01	
13	D039	500	P	S01	
14	D040	500	P	S01	
15	D041	500	P	S01	
16	D042	500	P	S01	
17	D043	500	P	S01	
18	F001	10,000	P	S01	
19	F002	10,000	P	S01	
20	F003	20,000	P	S01	
21	F004	1,000	P	S01	
22	F005	30,000	P	S01	
23	F007	1,000	P	S01	
24	F008	1,000	P	S01	
25	U075	500	P	S01	
26	U121	500	P	S01	

Continued from page 2.

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Form Approved OMB No. 158-S80004

EPA I.D. NUMBER (enter from page 1)												T/A	C
W	N	M	6	5	7	2	1	2	4	4	2	2	1

FOR OFFICIAL USE ONLY				
W	DUP	T/A	C 2	DUP

IV. DESCRIPTION OF HAZARDOUS WASTES (continued)

LINE NO.	A. EPA HAZARD. WASTE NO. (enter code)	B. ESTIMATED ANNUAL QUANTITY OF WASTE	C. UNIT OF MEASURE (enter code)	D. PROCESSES 1. PROCESS CODES (enter)	D. PROCESSES 2. PROCESS DESCRIPTION (If a code is not entered in D(1))
1	U * * *	10,000	P	S 0 1	*Miscellaneous U listed wastes generated from expired shelf-
2					life products. May consist of
3					any U-listed wastes as defined in 40 CFR 261.
4	P * * *	10,000	P	S 0 1	*Miscellaneous P-listed wastes generated from expired shelf-
5					life products. May consist of
6					any P-listed wastes as defined in 40 CFR 261.
7		25,000	P	S 0 1	PCB Contaminated items
8		5,000	P	S 0 1	Asbestos containing materials
9	F 0 0 6	2,500	P	S 0 1	
10					
11					
12					
13					
14					
15					
16					
17					
18					
19					
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21					
22					
23					
24					
25					
26					

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N M 6 5 7 2 1 2 4 4 2 2	

XV. Map

Attach to this application a topographic map of the area extending to at least one mile beyond property boundaries. The map must show the outline of the facility, the location of each of its existing and proposed intake and discharge structures, each of its hazardous waste treatment, storage, or disposal facilities, and each well where it injects fluids underground. Include all springs, rivers and other surface water bodies in this map area. See instructions for precise requirements.

XVI. Facility Drawing

All existing facilities must include a scale drawing of the facility (see instructions for more detail).

XVII. Photographs

All existing facilities must include photographs (aerial or ground-level) that clearly delineate all existing structures; existing storage, treatment and disposal areas; and sites of future storage, treatment or disposal areas (see instructions for more detail).

XVIII. Certification(s)

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

Owner Signature: Lloyd W. Newton	Date Signed: 23 Apr 93
Name and Official Title (type or print): LLOYD W. NEWTON Brigadier General, USAF Commander	
Owner Signature	Date Signed
Name and Official Title (type or print)	
Operator Signature: [signature]	Date Signed: 17 MAY 93
Name and Official Title (type or print): ALBERT N. TINIANOW Colonel (Sel.) USAF DRMS Deputy Commander	
Operator Signature	Date Signed
Name and Official Title (type or print)	

XIX. Comments

Note: Mail completed form to the appropriate EPA Regional or State Office. (refer to instructions for more information)

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Owner Signature: Lloyd W. Newton	Date Signed: 23 APR 93
Name and Official Title (type or print): LLOYD W. NEWTON Brigadier General, USAF Commander	
Owner Signature	Date Signed
Name and Official Title (type or print)	
Operator Signature	Date Signed: 15 Apr 93
Name and Official Title (type or print): GORDON R. JANIEC Lt Col, USAF Base Civil Engineer	
Operator Signature	Date Signed
Name and Official Title (type or print)	

XIX. Comments

Note: Mail completed form to the appropriate EPA Regional or State Office. (refer to instructions for more information)